

MARSHFIELD NEWS HERALD

Community health centers essential, Marshfield health center director says

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By Ellyn Ferguson

WASHINGTON - Nearly 6,000 low-income Wisconsinites, some driving more than three hours from Green Bay, visited a dental clinic in Chippewa Falls shortly after it opened, Greg Nycz told a congressional panel Wednesday.

They came from 42 of Wisconsin's 72 counties because of "unrelenting oral pain" and because they couldn't pay the full tab for expensive dental work, said Nycz, director of the Family Health Center of Marshfield Inc.

Nycz said the dental clinic, the third such facility opened by the Marshfield center, underscores the continued need for community health centers that "improve people's lives and return real value to the taxpayer and the health care system."

There are 1,100 community health centers nationwide in medically under-served areas, Nycz said. Community health centers receive about \$2 billion a year in federal funding and treat 17 million people a year. Nycz said an additional \$248 million in 2009 would allow the centers to treat another 1.8 million patients.

President Bush has requested a \$26.8 million increase for the health centers in his budget proposal.

Nycz also urged Congress to put more money into the National Health Service Corps program. The program provides scholarships and loan repayment aid to medical and dental school graduates who in return work at community health centers or medically under-served areas.

Nycz, one of four witnesses, found a receptive audience in Rep. Dave Obey, chairman of the House Appropriations subcommittee on labor, health and human services. Obey, D-Wausau, said he has known Nycz for years and thinks community health centers help fill gaps in nation's health care system.

Obey held Wednesday's subcommittee hearing as part of the process of writing a 2009 spending bill and to focus on areas that could be key to building a universal health care system.

"I believe whoever is elected president next time is going to have no choice but to deal with the question of universal health care," Obey said. "The question is ... which programs should we be expanding or changing in order to prepare the health care system for the day when we have universal health care, universal meaningful access."

New York Rep. Jim Walsh, the subcommittee's top Republican, agreed "the next president will have to deal with this in a realistic way during the campaign and as president. I think it's a debate the country is ready for."

Walsh said universal access to health care is "a key issue for us."

In addition to Nycz, the subcommittee also heard from Deborah Chollet of Mathematica Policy Research Inc., Jeanne M. Lambrew of the Lyndon B. Johnson School of Public Affairs at the University of Texas and Richard Popper, executive director of Maryland's high-risk insurance pool for the uninsurable.

Lambrew said one in five people report needing care but don't get it.

"This largely results from a lack of health insurance," she said.

Lambrew and Chollet said that as more employers drop health insurance because of costs more people find themselves paying for expensive individual health insurance policies or going without insurance.

Leadership needs to come from the federal government, Chollet said.

"You can't have 50 different unique (state) visions," she said. "I think citizens should be able to expect some continuity from state to state."